Substitute for form 1449/PTO (Revised 07/2007)				Complete if Known			
				Application Number	09/980,376		
INFORMATION DISCLOSURE			CTIDE	Filing Date 03/20/2002			
				First Named Inventor	Haumont et al.		
STATEMENT BY APPLICANT				Art Unit	2617		
(Use as many sheets as necessary)			)	Examiner Name	J. Ajayi		
Sheet	1	of	1	Attorney Docket Number	042933/373875		

			ι	J. S. PATEN	T D	OCUMENTS				
Examiner Initials*	Cite No.	Document Number  Number - Kind Code (if known)		Publication Date		Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Fig Appear			
			FOR	EIGN PAT	ENT	DOCUMENTS				
Examiner Initials	Cite No.	Foreign Patent Document  Country Code - Number Kind Code (if known)		olication Date M-DD-YYYY		me of Patentee or plicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	English Language Translation Attached		
				OTHER I	000	CUMENTS				
Examiner Initials*	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or							English Language Translatio Attached		
	1	Search Report for PCT/EP00/04231 dated June 4, 1999.								
	2	International Preliminary Examination Report for PCT/EP00/04231 dated August 22, 2001.								

Examiner	Date	
Signature	Considered	

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.